



Town of Warren, Rhode Island

Town Hall • 514 Main Street • 02885
www.townofwarren-ri.gov

Zoning Board of Appeals

401-245-7343 • 401-245-0595 (fax)

PETITION FOR APPEAL

(for office use only) Date received _____ Application Number _____

To the Honorable Board of Review of the Town of Warren, Rhode Island,
The subscriber, your petitioner, respectfully requests that they be granted an
Appeal from the terms of the Zoning Ordinance,

Section(s) _____

For the property located at _____

Tax Assessor's Plat _____ Lot(s) _____

Petitioner requests that an **Appeal** be granted as follows: _____

Petitioner requests this **Appeal** in accordance with the standards set forth in
Section 32-19 (A) of the Town of Warren Zoning Ordinance.

APPLICANT'S SIGNATURE _____ Date _____

PROPERTY OWNER'S SIGNATURE _____ Date _____

(office use only) Application accepted: _____ Date _____